

COPY

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF
TENNESSEE, AT KNOXVILLE

TINA MULLINAX;
BRIAN MULLINAX; and
ROBIN SUTTON;

Plaintiffs;

v.

No: 3:18-cv-00002

SEVIER COUNTY,
SEVIER COUNTY AMBULANCE SERVICE;
MICHAEL O'CONNOR, EMT IV;
BLAKE GREGG;
TODD SPENCE;
JUSTIN JOHNSON, SCSO;
SCSO CORPORAL BART TYNER;
SCSO DEPUTY JESSICA SAVARESE;
SCSO DEPUTY MICHAEL PHIPPS;
SCSO DEPUTY WATTS;
SCSO INVESTIGATOR JOHNNY BOHANON;
SCSO SERGEANT WAYNE PATTERSON;

Defendants.

**TINA MULLINAX'S RESPONSE TO DEFENDANTS' FIRST SET OF
INTERROGATORIES AND REQUESTS FOR PRODUCTION OF DOCUMENTS**

Now Comes, Plaintiff, Tina Mullinax, by and through counsel, answers Defendants' First Set of Interrogatories and Request for Production of Documents as follows.



these events occurred, they had been staying with her for approximately two nights as overnight guests.)

3. Please provide the name and business address of each employer you have had for the past ten years, including your job title, a description of your job duties, and the dates of your employment therewith.

Response: Subject to and without waiving any responses and objections, Plaintiff answers this Interrogatory as follows: Plaintiff is currently getting her work history from the IRS (tracking ID 10040627). Plaintiff will supplement her response once Plaintiff receives such information.

4. If you assert that you are disabled and unable to work please state the basis for the disability claim.

Response: Subject to and without waiving any responses and objections, Plaintiff answers this Interrogatory as follows:

- a. Plaintiff is on disability for her mental condition. She has been diagnosed with PTSD and other medical problems as a result of the incident giving rise to this lawsuit. Plaintiff has requested the Social Security Office to release her records, and Plaintiff will supplement response once the Social Security Office releases her information.

5. Please state in detail with specificity, all facts and events witnessed by you leading up to and including the occurrence of which you complain of herein, including all facts and events witnessed or known by you on the part of these Defendants which you claim constitute the wrongful conduct which you allege.

Response: Subject to and without waiving any responses and objections, Plaintiff



answers this Interrogatory as follows:

- a. In addition to the following statement, please refer to the facts set forth in Plaintiff's Complaint, as well as the body cam video of Officer Justin Johnson submitted in response to Request for Production 1. Plaintiff was on psychiatric medication at the time of these events. On the day of the incident, Brian and Tina Mullinax had been staying with her mother, Robin Sutton for approximately two nights. Plaintiff had just walked outside Ms. Sutton's residence and was walking over to her cousin's house when Officer Johnson started chasing her and assaulted her. Plaintiff recalls that while she was being held down by Michael O'Connor that his hand went down her pants and that Officer Justin Johnson kicked her in the eye. Plaintiff also recalls that during the struggle she sustained a "pressure pop" to her ear.

6. Please give the name, complete address and telephone number of every person who may have witnessed any of the facts of wrongful conduct alleged by you and give a summary of all facts known to or events witnessed by each witness.

Response: Subject to and without waiving any responses and objections, Plaintiff answers this Interrogatory as follows:

- a. Name: Gary Humphrey
- b. Address: 2875 Cedar Bluff Road, Sevierville, TN 37876
- c. Phone: 865-206-9052
- d. Description: he is an eye witness to the event described in the complaint.

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7. Please describe in detail and with specificity all injuries and damages which you allege to
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have been incurred by you as a proximate result of the acts which you complaint herein.

Response: Subject to and without waiving any responses and objections, Plaintiff answers this Interrogatory as follows:

- a. Please refer to the complaint and interrogatories 4 and 5.
- b. Plaintiff suffers from the following specific injuries as a result of Defendants' actions:
 - i. PTSD
 - ii. Retina Problems/Vision Loss
 - iii. Lower back damage – slipped disc(s)
 - iv. Upper back damage – herniated/bulging disc(s), swelling, discomfort
 - v. Constant ear issues caused by “pressure pop” to her ear during the course of her assault
- 8. Please give the name and complete office address of every doctor, hospital, or other health-care provider of every kind or nature who administered treatment, testing, or evaluation to you as result of any injuries identified above.

Response: Subject to and without waiving any responses and objections, Plaintiff answers this Interrogatory as follows:

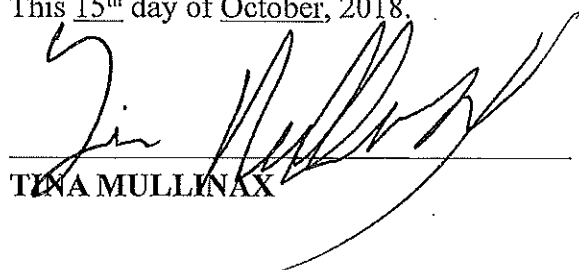
- a. April McGeorge, Urgent and Family Care, 108 Lovell Road, Knoxville, TN 37922
- b. LeConte Medical Center, 742 Middle Creek Rd, Sevierville, TN 37862
- c. Megan Browder, Peninsula Outpatients Center-Sevierville, 1104 Foxwood Dr, Sevierville, TN 37862
- d. Lisa May, Peninsula, 210 Simmons St., Maryville, TN 37801

VERIFICATION OF ANSWERS

STATE OF TENNESSEE)
)
COUNTY OF KNOX)

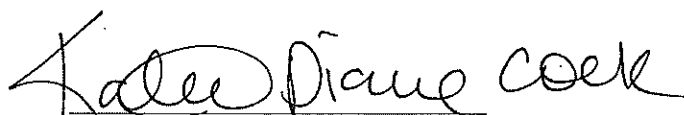
Personally appeared before me, the undersigned authority, the within named Plaintiff, Tina Mullinax, and made oath that the answers to the foregoing Interrogatories are true and correct to the best of her information, knowledge, and belief.

This 15th day of October, 2018.



TINA MULLINAX

Sworn and Subscribed before me this 15th day of October, 2018.



Notary Public

My Commission Expires August 1, 2018

My commission expires: 8/31/2019

